09/339,325

Apply for use through 10/31/99, OMB 0651-0031
Patent and Trademark Onice: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Numb r

TO A NORMITTAL F	0 D N 4	Filing Dat	June 22, 1999 <b>RECEIVE</b>	Ψ.		
TRANSMITTAL FORM		First Named Inv nt r	Yoav Shoham NOV 2 9 199	<b>=</b>		
12 (13) pe weed for all correspondence after initial filing)		Group Art Unit	2761 <b>Group 27</b> 0	17		
		Examiner Name	GIOUP ZA	2199		
& White Pages in This Submission	11	Attorney Docket Number	003660.P001X	] ~		
	ENCLOS	SURES (check all tha	nt apply)	ĺ		
Fee Transmittal Form	Assignm	nent Papers Application)	After Allowance Communication to Group			
☐ Fee.∿ttached	Drawing	(s)	Appeal Communication to Board of Appeals and Interferences			
Amendment / Response	Licensin	g-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final	Petition and Acc	Routing Slip (PTO/SB/69) companying Petition	Proprietary Information			
Extension of Time Request	To Conv	vert a nal Application	Status Letter			
Express Abandonment Request	l	of Attorney, Revocation of Correspondence Address	Additional Enclosure(s) (please identify below):			
Information Disclosure Statement	Termina	l Disclaimer	Datum market	-		
Certified Copy of Priority Document(s)	Small E	ntity Statement	Return postcard.			
Response to Missing Parts/ Incomplete Application	Request	t for Refund				
Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks			1		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
SIGNATU	 RE OF APPLIC	CANT, ATTORNEY, OR	AGENT	-		
Firm Carol F. Barr	y, Reg. No. 41	,600		1		
or Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN						
Signature Curl 7	Z,	<del>-</del>				
Date November 18, 1999						
	CERTIEICA	TE OF MAILING		<u>-</u>		
			0	-		
I hereby certify that this correspondence is to addressed to: Assistant Commissioner for F	Patents, Washingt	on, D.C. 20231 on this date:	Service as first class mail in an envelope  November 18, 1999			
Typed or printed name Azar Burni	nam					
Signature Sur Role		D	ate 11/13/99	j		

Burden Hour Statement: This form sestimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## TRANSMITTAL

Petent fees are subject to annual revision on October 1.
These are the fees effective October 1, 1997.
Small Entity payments must be supported be a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SE/09-12.
See 37 C.F.R. §§ 1.28 and 1.28

TOTAL AMOUNT OF PAYMENT

(\$) 96.00

			articor.	
Cor	nplete if Known			)
Application Number	09/339,325			1
Filing Date	06/22/99			1
First Named Inventor	Yoav Shoham, et all	217	FIV	ŦΠ
Examiner Name		# W	<del>/ L 1 - T - 1</del>	7
Group Art Unit	2761	NOV	2919	do
Attorney Docket Number	003660.P001X	MOA	C 7 17	77

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued) Group 2700						
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:		3. ADDITIONAL FEE						
indicated fees and credit any over payments to:		Entity	Small	Entity				
Deposit	Fee	-	Fee	Fee	Fee	Description	Fee Paid	
Account 02-2666	Code	(\$)	Code	(\$)		·		
	105	130	205	65	Surcharge - late fil	ing fee or oath		
Deposit Account Blakely, Sokoloff, Taylor & Zafman LLP		50	227	25	Surcharge - late po	rovisional filing fee or		
Name	139	130	139	130	Non-English spec	cification		
Charge Any Additional Charge the Issue Fee Set in 37 Fee Required Under 37 CFR 3-18 at the Mailing of the Notice of Allowance, 37 CFR	147	2,520	147	2,520	For filing a reques	t for reexamination		
1.311(b)	112	920	112	920	Requesting public Examiner action	ation of SIR prior to		
2. Payment Enclosed:  Check Money Other Order	113	1,840	113	1,840	Requesting public Examiner action	ation of SIR after		
FEE CALCULATION (fees effective 10/01/96)	115	110	215	55	Extension for resp	onse within first month	<u> </u>	
	116	380	216		•	onse within second mont	h	
1. FILING FEE	117		217			onse within third month	<b>  </b>	
Large Entity Small Entity  Fee Fee Fee Fee Fee Description Fee Paid		1,360			•	onse within fourth month	<b>   </b>	
Code (\$) Code (\$)	120	1,850				onse within fifth month		
101 760 201 380 Utility filing fee	119		219		Notice of Appeal		<b>├</b>	
106 310 206 155 Design filing fee	120		220		Filing a brief in sup	• • •	<u> </u>	
107 480 207 240 Plant filing fee	121	1,360	221		Request for oral h	•	<u>                                     </u>	
108 760 208 380 Reissue filing fee	140		240		Petition to revive	a public use proceeding		
114 150 214 75 Provisional filing fee		1,210				e - unintentionally	<del>  </del>	
	i	1,210			Utility issue fee (or		<del>                                     </del>	
SUBTOTAL (1) (\$)	143		243		Design issue fee	icissue,		
2. EXTRA CLAIM FEES Fee from	144		244		Plant issue fee			
Extra Claims below Fee Paid	122		122		Petitions to the Co	ommissioner		
Total Claims 21 - 21 ** = 1 X 18.00 = \$18.00	123		123			provisional applications		
Independent	126	240	126			ormation Disclosure Stmt		
Multiple Dependent Claims =		40	581	40	Recording each p	atent assignment per		
**or number previously paid, if greater, For Reissues, see below  Large Entity Small Entity					property (times nu	imber of properties)		
Fee Fee Fee Fee Description	146	760	246	380		n after final rejection		
Code (\$) Code (\$)					(37 CFR 1.129(a))			
103 18 203 9 Claims in excess of 20	149	760	249	380	30 For each additional invention to be examined (37 CFR 1.129(b))			
102 78 202 39 Independent claims in excess of 3 104 270 204 135 Multiple Dependent claim	Other fee (specify)						339325	
109 78 209 39 "Reissue independent claims	Othe	r fee (s	pecif	/)				
over original patent							98	
110 18 210 9 **Reissue daims in excess of 20 and over original patent							0226	
SUBTOTAL (2) (\$) 96.00	* Reduce	ed by Bas	ic Filing	Fee Paid	SUBT	OTAL (3) (\$)	0105	
SUBMITTED BY						Complete (if app	licable)	
Typed or Printed Name Carol F. Barry, Reg. No. 41	,600	.600			F	Reg. Number		
Signature		1	Date		′* <i>*</i> ″′′′   L	isei iD	02-2666	
SUBTOTAL (2) (\$) 96.00 *Reduced by Basic Filing Fee Paid *SUBTOTAL (3) (\$)  SUBMITTED BY  Carol F. Barry, Reg. No. 41,600  Signature  Date 11/17/99 Deposit Account User ID  Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.								

SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	Carol F. Barry, Reg. No. 41,600			Reg. Number	-
Signature	Carol R	Date	11/1 <b>7</b> /99	Deposit Account User ID	02-2666

ᇙᇙ 18.00

ಽ